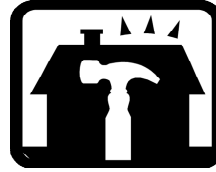




City of
Blue Earth



City of Blue Earth
Application for
Housing Rehabilitation Assistance

2018



APPLICATION FOR HOUSING REHABILITATION ASSISTANCE 2018

APPLICANT'S LAST NAME: _____

I. Borrower Information

Borrower's Name			Co-Borrower's Name		
	Home Phone	DOB		Home Phone	DOB
Cell Phone Number:			Cell Phone Number:		
Email Address:			Email Address:		
Marital Status (Circle One) Single Separated Married Divorced Widowed					
Present Address:					
<input type="checkbox"/> Own <input type="checkbox"/> # of Years					
Mortgage Company					
Date of Purchase					
Current Balance					

II. Household Composition

List everyone living in the house.

Legal Name	Sex (M/F)	Date of Birth	Age		Relation to Borrower(s)

(Attach additional information on a separate sheet if necessary).

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III. Employment Information

List all money earned by everyone 18 years of age or older living in the household. If an adult family member lives with the applicant, all income of that individual will be considered as part of the borrower's income.

Borrower	Co-Borrower
Name and Address of Employer:	Name and Address of Employer:
Work Phone Number:	Work Phone Number:
How long have you had your present job?	How long have you had your present job?
Position/Title/Type of Business:	Position/Title/Type of Business:
Gross Monthly Income:	Gross Monthly Income:

(Attach additional employment information on a separate sheet if necessary).

IV. Combined Monthly Income

List all income received from household members. This includes money from employment, tips, bonuses, child support, Social Security, disability payments (SSI), Worker's Compensations, retirement benefits, AFDC, cash welfare benefits, Veterans benefits, rental property income, stock dividends, income from bank accounts, alimony, unemployment, retirement accounts, and any other source.

Gross Monthly Income	Borrower	Co-Borrower	Other Adult Household Members	Total	Combined Monthly Expenses	
Base Employment Income	\$	\$	\$	\$	Mortgage/Rent	\$
Overtime						
Bonuses						
Commissions						
Child Support/Alimony						
Social Security Benefits						
Veteran's/Retirement Benefits						
Stock/Dividends/Interest						
Other						
TOTAL 1						
All Bank Accounts:						
	Borrower		Co-Borrower		Other Adult Household Members	
(includes: CD's, 401K, Checking, savings, etc.)	Account #	Balance	Account #	Balance	Account #	Balance
TOTAL 2		\$		\$		\$

(Attach additional information on a separate sheet if necessary).

APPLICATION FOR HOUSING REHABILITATION ASSISTANCE 2018

APPLICANT'S LAST NAME: _____

V. Existing Debt of Property to be Rehabilitated:

TYPE	Name of Institution	Monthly Payment	Balance
1 st Mortgage			
2 nd Mortgage			
Other			
Other			
Other			

VI. Eligibility Criteria

(Circle the correct answer)

1. Is your residence a single-family home? Yes/No
2. Do you own other property? Yes/No
3. Are your property taxes paid up-to-date? Yes/No
4. Do you owe any other bills (utilities) to the City of Blue Earth? Yes/No
5. Do you have homeowner's insurance? Yes/No
6. Is this property your primary residence? Yes/No
7. Is this property located within the City of Blue Earth? Yes/No

Required Documentation

The following documentation MUST be submitted with your application or it cannot be processed.

- Copy of Driver's License or other picture ID for each adult occupant
- Copy of Deed to the Property – Legal description section
- Copy of two most recent income tax returns for each adult occupant
- Paid property tax receipt (most current)
- Two current pay stubs for each working adult occupant
- Two most current bank statements for each adult occupant. Checking and Savings
- Proof of paid homeowner's insurance policy

If you receive income from any of the following sources, please provide documentation verifying such income.

- Disability income
- Retirement pension
- Social Security Benefits
- Alimony
- Child Support
- Public Assistance
- Dividends from Stock
- Rent from Real Estate
- Any other source of income

Note: All of the above items may not apply to you. Please attach only those that apply to you and others adults living in your home.

IMPORTANT – APPLICANT READ BEFORE SIGNING

The information provided above is true and complete to the best of my/our knowledge and belief. I/We consent to the disclosure of such information for purposes of income verification related to my/our application for financial assistance. I/We understand that any willful misstatement of material fact will be grounds for disqualification. Applicant understands that the information provided is needed to determine assistance eligibility and in no way assures qualification for assistance. I/We agree to comply with all terms, conditions and requirements as a condition of such loan or benefit.

Applicant Signature

Date

Co-Applicant Signature

Date